Levined December 1974

CALIFORNIA LIQUID WASTE HAULER RECORD

SFUND RECORDS CTR 999000519

STATE WATER RESOURCES CONTROL BOARD

STATE DEPARTMENT OF HEALTH	
PRODUCER OF WASTE (Nust be filled by producer)	HAULER OF WASTE (Must be filled by hauler)
Hame (print or type): LESLOCK	Name (print or type): Superior Industrial Pumping 97
Pick up Mdress: 133 Ul So WIAIN St LACE	Business Address: P.O. Rox 59389 T. A Call # 90059
(Mumber)' (Street)' (City) Telephone Humber:() F.O. or Contract Ho.;	Telephone Mumber: 757-1855 Pick Up: (Street) Time:
Order Placed By: Date: 4- 17-80	Telephone Number: 757-1855 Pick Up: (Street) (City) Time: : Dien Telephone Number: 757-1855 Pick Up: (State) 485
Lype of Process	Job No.: No. of Loads or Trips: Unit No.:
which Produced Wastes: (Examples: metal plating, equipment cleaning, oil drillingCode No.	Vehicle: vacuum truckberrels,
unstaunter treatment, pickling bath, petroleum refining)	The described waste was hould by me to the disposal (specify)
DESCRIPTION OF WASTE (Must be filled by producer)	facility named below and was accepted. I certify (or declare) under penalty
Check type of wastes: 1.	of perjury that the foregoing is true
2. Alkaline solution 9. Oil	DISPOSER OF WASTE (Must be flined by disposer)
3. D Pesticides 10. D Drilling and 4. D Paint sludge 11. D Contaminated soil and sand	DISPOSER OF WASTE (Mist be 1127ed by disposer)
5. [] Solvent 12. [] Connery waste 6. [] Tetracthyl lead sludge 13. [] Earcy waste	Name (print or type) 26/10 00 Garffeld Avd.
7. Chemical tollet wastes 16. 2 Nuc 2nd water 15. Brine	Stre Address: NOTTENED CELL CONT 19784 Code No.
Other (Specify)	The hauler above delivered the described waste to this disposal facility and
Code No.	it was an acceptable material under the terms of RMQCB requirements, State Department of Health regulations, and local restrictions.
Components	Quantity measured at site (if applicable): State for (if any):
(Examples: Hydrochloric acid, lime, caustic sode, Concentration: phenolics, solvents (list), metals (list), Upper Lower t ppe	Handling Method(s):
erganics (list), cyamide)	Tecovery .
<u></u>	
<u></u>	(Examples: incineration, ngutralisation, precipitation)-Code No.
<u>, </u>	treatment (specify):
	If waste is held for Threes of Monday Specify that location
	If waste is held for the possife the decity final location
	I certify (or declare) under penalty
<u> </u>	of perjury that the foregoing is true and correct.
Massedous Properties of Weste: Massedous Properties of Weste:	Signature of Authorized agent and title
Bulk Volume: 3, 2 CC Xaal Cone Charrels Other	The site operator shall submit a legible copy of each completed Record to the
(42 gal) (specify)	State Department of Health with monthly fee reports.
(Number)drunecertonehegsother	/ //a
Physical State:	A029613
Special Handling Instructions (if any):	110/100/10
	\
	NO 2 da
The waste is described to the best of my ability and is was delivered to	Nº 382
a licensed liquid waste hauler (if applicable)	FOR INFORMATION RELATED TO SPILLS OR OTHER EMERGENCIES INVOLVING
I certify (or declare) under penalty of perjury that the foregoing is true and correct.	HAZARDOUS WASTE OR OTHER MATERIALS CALL (800) 424-9300.
and correct.	